Please fill out the following information:		
I, Print Name	, hereby request my voter registra	tion information be classified as private.
Address (resident address at which you are registered to vote)		
County	Last four digits of social security	Driver license or ID number
To make a voter registration record private, you must provide evidence that establishes that the release of the information on your voter registration record is likely to endanger your or a household member's safety or place you or a household member at risk of being stalked or harassed. Evidence may include a protective order, a police report, or other evidence designated by rule by the director of elections within the Office of the Lieutenant Governor.		
Please attach evidence or documentation to this request.		
PLEASE BE ADVISED this process is designed to protect your voter registration information. If your request is granted, your information may still be publically available in other public records and commercially available databases.		
	ormation provided is true and correct to oter registration classified as private un	
Signature	$\overline{\mathbf{D}_{2}}$	ate